



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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BIBDATASHEET

CONFIRMATION NO. 8481

Bib Data Sheet

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|---|---|---------------------------|--|------------------------------------|----------------------------|
| SERIAL NUMBER 09/514,207 | FILING DATE 02/28/2000 RULE | CLASS 379 | GROUP ART UNIT 2643 | ATTORNEY DOCKET NO. 046.0005 | |
| APPLICANTS James P. Cashiola, Austin, TX; | | | | | |
| ** CONTINUING DATA ***** | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 05/03/2000 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>R. B. Parne</i> <i>R.B.</i> Examiner's Signature Initials | | STATE OR COUNTRY TX | SHEETS DRAWING 6 | TOTAL CLAIMS 29 | INDEPENDENT CLAIMS 3 |
| ADDRESS Erik B Cherdak & Associates 11300 Rockville Pike Suite 906 Rockville, MD 20852 | | | | | |
| TITLE SYSTEM AND METHOD FOR BILLING COMMUNICATIONS SERVICES PROVISIONED ON ^{ON} DEMAND IN CONVERGING TELECOMMUNICATIONS NETWORK | | | | | |
| FILING FEE RECEIVED 491 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ | | |



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| SERIAL NUMBER 09/514,207 | FILING DATE 02/28/2000 RULE - | CLASS 379 | GROUP ART UNIT 2742 | ATTORNEY DOCKET NO. 046.0005 |
| APPLICANTS James P. Cashiola, Austin, TX ; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/03/2000 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials | | STATE OR COUNTRY TX | SHEETS DRAWING 6 | TOTAL CLAIMS 29 |
| INDEPENDENT CLAIMS 3 | | | | |
| ADDRESS Erik B Cherdak & Associates 11300 Rockville Pike Suite 906 Rockville, MD 20852 | | | | |
| TITLE System and method for billing communications services provisioned on demand in converging telecommunications network | | | | |
| FILING FEE RECEIVED 491 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |